

BWP AQ AP-4

SSEIS Identifier

Emission Unit-Organic Material Storage

Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Note:
d, e, f are for
Gasoline only

A. Emission Unit Description

1. Facility - the site or works at which the regulated activity occurs:

Name

2. Emission unit name / identifying number

3. Description

☐ Aboveground

☐ Below ground

4. Type (Floating roof, internal roof, fixed etc)

5. Physical description

Age

color

6. Dimensions

Height (feet)

Diameter (feet)

7. Capacity (gallons)

8. Construction type

9. Material stored

a. Name

b. CAS number

c. Vapor pressure and temp (⁰F)

d. RVP

e. Total oxygen content

f. Oxygenate name

g. Annual throughput

10. Loading / transferring:

a. Trucks

☐ Yes

☐ No

b. Ships / barges / marine vessels

☐ Yes

☐ No

c. Rail Car

☐ Yes

☐ No

d. Other (identify)

☐ Yes

☐ No

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A. Emission Unit Description (cont.)

11. Air Pollution Control Equipment

☐ Yes

☐ No

a. Type (floating roof, carbon adsorption, etc)

b. Model / manufacturer

c. Efficiency (percent)

d. Date of installation

e. Applicable DEP Air Quality approvals

% capture

% Control

Approval Number

Date

B. Certification

Signed under the pains and penalties of perjury:

"I hereby certify that I have personally examined the foregoing and am familiar with the information contained in this document and all attachments and, that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment."

Signature of responsible official

Print Name

Title

Date

C. For DEP USE ONLY

Stack Identifier

Point Identified

SCC Identifier

Method Code